

## **Supportive Services Plan Instructions**

1. Submit the MHSA Supportive Services Information Items 1 through 16, as listed on the Application Index & Checklist.
2. Enter required information into the yellow box marked "Response".

**Item D.1      Shared Housing Development Summary Form (Attachment B)**

Instructions: Complete and submit the Shared Housing Development Summary Form **(Attachment B)**

**Item 2      Development Description**

The Development Description should provide a narrative (approximately two pages) that includes:

1. Name and location of the proposed housing development;
2. Service goals of the development;
3. Characteristics of tenants to be served;
4. Type of housing to be provided;
5. How the building(s) in which housing and services will be provided will meet the housing and service needs of the MHSA tenants (location, building type, layout, features, etc.)
6. Name of primary service provider, property manager, and other development partners; and,
7. Summary of the development financing.

**Response:**

**Item 3      Consistency with the Three-Year Program and Expenditure Plan**

Describe how the proposed housing development is consistent with the sponsoring county mental health department's approved Three-Year Program and Expenditure Plan. Provide specific information regarding how the development meets the priorities and goals identified in the Three-Year Program and Expenditure Plan.

**Response:**

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**Item 4      Description of Target Population to be Served**

Describe the MHSA Shared Housing target population to be served in the development. Include a description of the following:

1. Age group, i.e., adults, older adults, children, transition-aged youth;
2. The anticipated income level of the MHSA tenants; and,
3. A description of the anticipated special needs of the target population to be served, e.g., physical disabilities, chronic illness, substance abuse, prior housing status, etc.

**Response:**

**Item 5      Tenant Eligibility Certification**

The county mental health department is responsible for certifying the eligibility of individuals, applying for tenancy in an MHSA unit, for compliance with the target population criteria. Submit a narrative description of the following:

1. How an individual applies to the county to become certified as eligible for an MHSA unit;
2. How certification of eligibility will be documented, provided to the individual applicant, and maintained by the county; and,
3. How certification of eligibility will be provided to the property manager/development.

**Response:**

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**Item 6      Tenant Selection Plan**

Provide a tenant selection plan, specific to the proposed development, that describes the following:

1. How prospective tenants will be referred to and selected for MHSA units in the development;
2. The tenant application process;
3. The procedure for maintaining the wait list;
4. The process for screening and evaluating the eligibility of the prospective MHSA tenants;
5. The criteria that will be used to determine a prospective MHSA tenant's eligibility for occupancy in the development;
6. The appeals process for individuals who are denied tenancy in an MHSA unit; and,
7. The reasonable accommodations policies and protocols.

**NOTE:** The Department's approval of the MHSA Housing Application does not ensure that the Tenant Certification/Referral Process is compliant with state and federal fair housing laws. Please seek legal counsel to ensure that the Tenant Certification/Referral Process complies with state and federal fair housing laws.

**Response:**

## Item 7 Supportive Services Plan

**NOTE:** A tenant's participation in supportive services may not be a condition of occupancy in MHSA units.

Describe the development's approach to providing supportive services to MHSA tenants. The following information should be provided:

1. A description of the anticipated needs of the MHSA tenants;
2. The supportive service provider's initial and ongoing process for assessing the supportive service needs of the MHSA tenants;
3. A description of each service to be made available to the MHSA tenants, to include where and how the service will be delivered, the frequency of the service delivery and identification of the service provider. A description of the available services and supports should include, but not be limited to:
  - a) Mental health services
  - b) Physical health services (including prevention programs)
  - c) Employment/vocational services
  - d) Educational opportunities and linkages
  - e) Substance abuse services
  - f) Budget and financial training
  - g) Assistance in obtaining and maintaining benefits/entitlements
  - h) Linkage to community-based services and resources
4. Indicate whether or not there will be an onsite service coordinator, and include the ratio of onsite staff to MHSA tenants. If there is no onsite service coordination, provide a description of service coordination for the development;
5. A description of how services will support wellness, recovery and resiliency. It is anticipated that the supportive services plan for the development will include services that are facilitated by peers and/or consumers. If this is not part of your service delivery approach, please provide an explanation;
6. A description of how the MHSA tenants will be engaged in supportive services and community life. Include strategies and specific methods for engaging tenants in supportive services and the frequency of contact between supportive services staff and MHSA tenants. This description should also include the identification of staff (the responsible service provider) and specific strategies for working with MHSA tenants to maintain housing stability and plans for handling crisis intervention;
7. If the Development is housing for homeless youth, provide a description of services to be provided to meet the unique needs of the population including engagement strategies and peer involvement. In addition, provide a description of how transition-aged youth MHSA tenants will be assisted in transitioning to other permanent housing once they reach 25 years of age;
8. Supportive services must be culturally and linguistically competent. Describe how services will meet this requirement including, when necessary, how services will be provided to MHSA tenants who do not speak English and how communication between the property manager and the non-English speaking MHSA tenants will be facilitated;
9. Describe the process to ensure effective communication between the service provider and the property manager regarding the status of MHSA tenants in the development and any other issues regarding the development, including but not limited to regularly scheduled meetings and



## MHSA Special Needs Housing Program Shared Housing Application

the identification of a single point of contact for communication and coordination of supportive services; and,

10. Describe the plan for developing "house rules" and **provide a copy of any rules** that may be in place at initial rent-up; (**Please label and attach as "House Rules"**).

**Response:**

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**Item 8      Supportive Services Chart (Attachment C)**

Submit the Supportive Services Chart (**Attachment C**). The Chart must list all services that will be provided to MHSA tenants, including any in-kind services essential to the success of the Supportive Services Plan.

**Item 9      Design Considerations for Meeting the Needs of the MHSA Tenants**

Describe the following:

- 1    Physical space, including common areas, outdoor areas, landscaping, physical access to the property, security;
- 2    Supportive services space (if any), including any quiet area on site for tenants to meet service staff;
- 3    How the MHSA units will be designed to provide appropriate accommodations for physically disabled MHSA tenants, if appropriate.

**Response:**

**Item 10 Outcome Reporting Requirements (Attachment D)**

This form must be completed by the County Mental Health Department, verifying the County's commitment to comply with outcome reporting requirements for the MHSA Shared Housing tenants.

**Item 11      County Mental Health Sponsorship and Services Verification Form  
(Attachment E)**

This form must be completed by the County Mental Health Department, verifying the County's commitment to provide supportive services to this development.

**Item 12      Primary Service Provider Experience Serving Target Population**

The primary service provider must demonstrate that they have experience in successfully delivering services to tenants with serious mental illness. Describe general experience, and if applicable, identify and describe all developments in which the primary service provider has provided supportive services to tenants with serious mental illness. For each development, include the following:

1. Name of the development;
2. Number of units targeted to tenants with serious mental illness;
3. Services provided; and
4. Period of time during which the primary service provider delivered services to the developments' tenants.

**NOTE:** If the County Mental Health Department has not designated a primary service provider at the time of the initial application submittal, the County will be considered the primary service provider. An updated submission reflecting the final identification of a service provider along with the proposed provider's experience and qualifications must be submitted for approval not less than 45 days prior to initial rent-up.

**Response:**

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**Item 13      County Fair Housing Certification (Attachment F)**

This form must be completed by the County Mental Health Department, certifying the County's compliance with local, state, and federal fair housing laws.

**Item 14      Draft Memorandum of Understanding**

If available at time of application, submit a draft of the Memorandum of Understanding (MOU) between the borrower, the primary service provider(s), the property management agent, and the County Mental Health Department. The MOU should document the following:

1. The roles and responsibilities of each partner;
2. Each partner's willingness to enter into a contract to carry out those roles and responsibilities (including provision of supportive services and property management services);
3. How all reporting requirements will be met;
4. How privacy and confidentiality requirements will be met; and,
5. Procedures for ongoing communication and decision-making between the property management agent and the primary service provider to assist MHSA tenants in maintaining housing stability.

**NOTE:** A fully executed MOU acceptable to CalHFA must be submitted not less than 45 days prior to initial rent-up.



**Item 15      Supportive Services Budget Form and Budget Narrative (Attachment G)**

Complete the Supportive Services Budget Form and Budget Narrative (**Attachment G**). The budget must depict both the expenses and sources of revenue for the costs associated with the delivery of supportive services to the development. Additionally provide a budget narrative that includes the staffing ratio for the Supportive Services Plan.

**NOTE:** Both of these items must be submitted for approval not less than 45 days prior to initial rent-up.